(c) and (d) The main reasons cited by the public sector general insurance companies for the slow progress under the Scheme, *inter alia,* include the following:

(i) lack of awareness and affordability of the BPL families; (ii) lack of reach of insurance companies in the rural areas; (iii) low premium structure makes it cost prohibitive for the insurance companies to effectively canvass the scheme; (iv) inadequate health infrastructure in the rural areas; (v) difficulty in identification of BPL families; and (vi) inadequate response from the State Governments in the implementation of UHls in its existing from.

To cover larger population of BPL families the Insurance Regulatory and Development Authority (IRDA) has notified 'Micro-Insurance' Regulations in November, 2005 enabling insurers to devise products, including health insurance, for low income groups. Further, the Ministry of Health and Family Welfare has issued guidelines to all States, under National Rural Health Mission, (NRHM) to develop health insurance schemes, keeping in view the local needs, with a maximum subsidy of Rs. 300/- per family for BPL population.

Security of gas pipeline from Myanmar

†393. SHRI SHAHID SIDDIQUI: Will the Minister of PETROLEUM AND NATURAL GAS be pleased to state:

(a) the status of gas pipeline passing through India and Myanmar;

(b) the details of States from where this pipeline would pass through and the total expenditure to be incurred thereon; and

(c) whether attention has also been paid on its security aspects, if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF PETROLEUM AND NATURAL GAS (SHRI DINSHA J. PATEL): (a) Yes, Sir. GAIL had envisaged the import of natural gas from Myanmar through onland pipeline from Myanmar *via* the north-eastern States of the country. For evacuation of gas from Myanmar, Gail has completed Detailed Feasibility Report.(DRF), Environment Management Plan.(EMP) and Rapid Risk Analysis study.

†Original notice of the question was received in Hindi.

GAIL submitted its bid. in response to an Invitation of Bids by the Ministry of Energy, Government of the Union of Myanmar for purchase of gas from Shwe and Shwe Phyu fields in A-1 block and Mya field in A-3 block in September, 2006. The Government of Myanmar subsequently intimated GAIL that they were reviewing their decision to sell this gas through the pipeline route. While exploring other options of seling the gas Ministry of Energy, Myanmar asked for a bid for 3.5 MMTPA of Liquefied Natural GAs (LNG). GAIL has submitted its bid to Myanmar in response to the same.

(b) As indicated in the DFR, the length of the possible pipeline from Myanmar border to Gaya (Bihar) is about 1573 kms. and the project cost is estimated at Rs. 8,500 crores. The pipeline was envisaged to route through Mizoram, Assam, West Bengal and Bihar.

(c) Yes, Sir. The operation and maintenance and monitoring of such pipelines is ensured through Supervisory Control and Data Acquisition (SCADA) system. Sectionalised Valve (SV) stations and Intermediate Pigging (IP) stations of such pipelines are monitored continuously. Besides, regular surveillance onland and by air.

Clearance of externally funded Kerala Health System Project

*394. SHRI A. VIJAYARAGHAVAN: Will the Minister of FINANCE be pleased to state:

(a) whether the competent Authority of Kerala has represented to the Central Government for the clearance of Kerala Health System Project, an externally funded project;

(b) if so, the details of the action taken in this regard; and

(c) whether any steps will be taken to recommend the Project in the light of the precarious situation prevailing in public health?

THE MINISTER OF FINANCE (SHRI P. CHIDAMBARAM): (a) Yes, Sir. Chief Minister, Government of Kerala, had submitted a memorandum to the Prime Minister on July8,2006, which *inter alia,* requested the clearance of the Kerala Health System project proposal.

(b) and (c) Chief Minister, Government of Kerala had earlierrepresented *vide* letter dated 12th August, 2005 for Finance Ministry's clearance for